FOR OUT OF STATE ATTORNEYS ONLY

INSTRUCTIONS FOR PETITIONERS APPLYING FOR ENROLLMENT TO PRACTICE LAW IN THE UNITED STATES DISTRICT COURT,

EASTERN AND WESTERN DISTRICTS OF ARKANSAS

A written application must be filed with the Clerk of Court in order to be admitted to

practice in the United States District Courts for the Eastern and Western Districts of

Arkansas. For this purpose, the attached *Petition for Enrollment* must be completed.

Each applicant is required to answer all questions on the *Personal History Statement*. This

information is necessary for the court to determine your qualifications. The statement must

bear your signature and be acknowledged before a Notary or other official authorized to

administer oaths.

In addition, your *Petition for Enrollment* must be accompanied by an <u>original</u> certificate

of good standing from the Clerk of the Supreme Court from the state where you reside and

from the Clerk of the United States District Court where you are enrolled.

Your Petition for Enrollment, Personal History Statement, Certificate of Good Standing

and \$55.00 fee, which includes a \$50.00 enrollment fee and a \$5.00 annual assessment for

the "Library Fund" pursuant to Local Rule Appendix XI, should be mailed or presented

to the:

Clerk

U.S. District Court

Eastern District of Arkansas

600 West Capitol Avenue, Suite 402

Little Rock, AR 72201-3325

If your petition and all supporting documents are in order, a Certificate of Enrollment will

be sent to you by return mail. If you have any questions, please call the Office of the

Clerk at (501) 604-5351.

¹ Hereafter, the "Library Fund" fee will be assessed and collected on a biennial basis; the biennial assessment fee is \$10.00.

(Distribute Only During Odd Fiscal Years)

UNITED STATES DISTRICT COURT EASTERN AND WESTERN DISTRICT OF ARKANSAS

PETITION FOR ENROLLMENT

	Ex Parte	
	HE DISTRICT COURT OF THE UNITED STATES WESTERN DISTRICTS OF ARKANSAS:	
Your petitioner respectfully shows t	the Court that I am a citizen of the United States and over	
the age of twenty-one years and of good m	noral character; that I possess the requisite qualifications	
of learning and ability to practice as an a	attorney and counselor at law in this Court; that I am	
regularly enrolled as an attorney and couns	selor at law in the Supreme Court where I reside.	
Wherefore, Petitioner prays the Honas an attorney at Law in the Court.	norable Court to make an order authorizing me to practice	
	Petitioner	
APPROVED BY:		
United States District Judge	Date Approved	
Prepared By:	Date:	

PERSONAL HISTORY STATEMENT

Name			
Business Address			
Firm			
P.O. Box			
Place of Birth			
Date of Birth			
Are you in sound	physical and	d mental condition?	
Are you a citizen	of the Unite	ed States?	
What has been yo	ur occupatio	on during the past five years?	?
Have you ever bee	en discharge	ed from any position?l	If so, for what reason?
Have you ever be	en arrested a	and/or convicted for any brea	ach or violation of any law? _
If so, please descr	ibe:		
Have you ever be	en sued?	If so, give particulars:	
	CAS:		
Give three referen	ccs.		
Give three referen	ccs.	Occupation	Address

14.	Education:			
	Name and Location of School Dates Attended Degree			
	Other Studies and Training for Legal Profession:			
15.	Are you now working in State or Federal Government?			
16.	Are you now actively engaged in the practice of law?			
17.	7. Give a telephone number where you may be reached for purposes of notification regaths this petition:			
	I certify that I have read and understand the local rules of this Court and that I agree to attend			
all co	inferences set by the Court or I shall associate local counsel to attend in my absence.			
	Applicant			
	NOTARY			
	Subscribed and sworn before me by the above-named applicant, thisDay of			
	Signature and Title			
	My commission expires:			

ATTORNEY'S OATH

I,	, do solemnly swear (or affirm) that I will
	f as an attorney of this Court and uprightly and according to law
•	defend the Constitution of the United States, so help me God.
11	, 1
	Applicant
	NOTARY
Subscribed and swo	rn before me by the above-named applicant, this day of
······································	20
	Signature and Title
	My commission expires: